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## PUBLIC HEALTH AND SOCIAL SERVICES DEPARTMENT

To: Thurston County Board of County Commissioners

Schelli Slaughter, MHA  
Director

From: Chris Hawkins, Program Manager, Public Health & Social Services (PHSS)  
Dept.

Dimyana Abdelmalek, MD, MPH  
Health Officer

Re: PHSS Response to Thurston Thrives Recommendations, Comprehensive Plan  
Update, Health & Human Services Chapter (11)

Date: December 8, 2020

### MEMORANDUM

The following provides Thurston County PHSS responses to Thurston Thrives recommendations about the Health and Human Services Chapter (11) Update, Thurston County Comprehensive Plan (TT/Thurston County Chamber Foundation recommendations shown below, with text changes for the HHS Chapter update underlined; PHSS recommended modifications are in bill strike-through format/red font color).

#### Thurston Thrives Recommendations, received 11/24/20:

**Recommendation 1:** Page 11 – 1 / Section title: 2020 Update: Critical Issues

Amend to include: Commit to achieve health equity and a course of action that reduces, and ultimately eliminates, health disparities so that optimal health for all is possible and that differences in life and health outcomes cannot be predicted on the basis of race.

PHSS response: Support – this is consistent with public health understanding of and effort toward health equity.

**Recommendation 2:** Page 11 – 2 / Section title: 5 Key Facts: Health and Human Services

Amend to include additional Key Fact: Specific health outcome measures are ~~significantly~~ worse for Thurston County BIPOC (black, indigenous, people of color) residents compared to White residents. In 2018, the life expectancy of Black residents was 76 years compared to 80 for White residents. In addition, between 2014 and 2018, infant mortality for Black infants was 9.9 per 1,000 compared to 4.4 per 1,000 for White infants.

PHSS response: Support – with removal of the word ‘significantly’ as this implies a statistical difference that is not present.

**Recommendation 3:** Page 11 – 9 / Section title: C. Public Health Priorities in Thurston County  
Subsection: Access to Health Services and Other Opportunities to Thrive

After paragraph that begins: “Equal resources and opportunity are necessary...” and ends with “...the public safety net, and health care providers.” insert:

Racism results in the structuring of opportunity and access by assigning value based solely on skin color and other physical characteristics. This creates unfair health disadvantages and opportunities to some individuals and communities and unfair health advantages to other individuals and communities. Systemic racism in the access to health services prevents the community as a whole from achieving optimal health for all.

PHSS response: Support - the description is offering a definition that appears to be accurate and steers toward an emphasis that PHSS and Thurston Thrives are adopting for current and upcoming years.

**Recommendation 4:** Page 11 – 11 / Section title: A. Health Data for Decision Making  
Access to Health Services

Rural residents and BIPOC residents (black, indigenous, people of color) often experience barriers to health care that limit their ability to obtain the services they need. In order for rural residents to have sufficient health care access, necessary and appropriate services must be available and obtainable in a timely manner. Data from the 2019 Health Equity Community Health Assessment process identified rural residents of Thurston County as being disproportionately impacted by a wide range of health-related issues and the 2020 Racial Equity Assessment process identified health disparities in birth outcomes and treatable chronic health conditions.

PHSS response: Support - these additional words are consistent with findings of local community health assessment conducted in 2019 and Racial Equity Assessment 2020.

**Recommendation 5:** Page 11 -22 / V. Goals, Objectives, and Policies

GOAL 1: INCREASE ACCESS TO MEDICAL, BEHAVIORAL, AND ORAL HEALTH SERVICES.

OBJECTIVE A: The County should increase access to appropriate medical, behavioral and oral health services.

POLICIES:

1. The County should support strategies to expand access to no cost or reduced cost primary care services and oral health services for uninsured or underinsured individuals and disproportionately impacted groups including residents who are Native or from the U.S. territories.
3. The County should explore opportunities to strengthen service delivery in locations serving disproportionately impacted groups, including the unhoused, BIPOC (black, indigenous, people of color) and rural residents.
6. The County should support access to care and services that support a healthy start in life for newborns and infants, with extra support for Black or African American and Native American women and families.
7. The County should support efforts to reduce health disparities resulting from differential access to care among all residents, especially those who are children, low-income or identify as LGBTQ and BIPOC (black, indigenous, people of color).
8. The County should support partnerships that work to eliminate health disparities or avoidable differences between groups of people created by societal barriers and systematic exclusion from access to medical, behavioral and oral health services opportunities.

9. The County should support partnerships that promote racial ~~equality~~equity and work to eliminate racism and systemic racism as a source of negative physical and behavioral health conditions.

PHSS response: Support each of these recommended changes to the policies under Goal 1, Objective A, as they are consistent with what we are finding in community health assessment 2019-2020, with change to the new policy (#9) or changing word choice from “equality” to equity.

**Recommendation 6:** Page 11 -23 / V. Goals, Objectives, and Policies

GOAL 2: Improve and protect air quality to reduce air based health hazards.

Objective A: The County should attain a high level of air quality to ensure a reduction on adverse health impacts.

Suggested New Policy: The County should support partnerships to reduce health disparities resulting from air quality and air based health hazards among all residents, especially those who identify as BIPOC (black, indigenous, people of color).

PHSS response: Support

**Recommendation 7:** Page 11 -23 / V. Goals, Objectives, and Policies

GOAL 3: Protect and preserve water quality and drinking water supplies.

Objective A: Water supplies should be protected with regulations and monitored for quality.

Suggested New Policy: The County should support partnerships to reduce health disparities resulting from poor drinking water supplies among all residents, especially those who identify as BIPOC (black, indigenous, people of color).

PHSS response: Support

**Recommendation 8:** Page 11 -26 / V. Goals, Objectives, and Policies

GOAL 5: Improve nutrition by promoting healthy and accessible food options for all local residents.

Objective A: The County should increase the access to healthful foods in communities, including provisions of full service grocery stores, farmers markets, and community gardens.

Suggested New Policy: The County should support partnerships to reduce health disparities resulting from lack of access to healthful food options among all residents, ~~especially with~~ particular attention to those who identify as BIPOC (black, indigenous, people of color).

PHSS response: Support – with minor change of wording from ‘especially...’ to ‘with particular attention to...’ Barriers found around this health issue that connect across the lifespan for the BIPOR community is in science/evidence.

**Recommendation 9:** Page 11-28 / V. Goals, Objectives, and Policies

GOAL 7: Improve community health by reducing substance abuse.

Objective C: The County should support community-based approaches that address the health, social, economic, environmental and other negative consequences associated with substance abuse for all residents, especially those who identify as BIPOC (black, indigenous, people of color).

PHSS response: Support – this recommended change to the policy under Goal 7, Objective C, is consistent with what we are finding in the local community health assessment 2019 and Racial Equity Assessment 2020.